V********	· · · · · · · · · · · · · · · · · · ·				om (03-04)
AU	THORIZATION TO A	CT IN A REPRESE	NTATIVE	CAPACITY	
In re Application of:	Claude Galand et al				
Application No.	09/901,441			<u> </u>	HECEIVED
Filed:	07/09/2001				ITRAL FIX CENT
Title:	OSF AUTONOMOUS SYSTEM	WITH A BACKBONE DIV	IDED INTO T	WO SUB-AREAS	MAR 1 4 2005
Attorney Docket No.	FR920000009US1	Art Unit:	2662		
441.4411	er named below is authorize urthermore, the practitioner rsuant to 37 CFR 1.34:	ed to conduct interviews is authorized to file con	and has the espondence	authority to bind the pr in the above-identified	incipal
	Name		Registration Number		7
Duke Yee Yee & Associates, P.C. 4100 Alpha Road, Suite 1100 Dallas, TX 75244 US		· ·	34285		
pandonment, a discl	of Attorney to the above-n ity to sign a request to chan aimer, a power of attorney, o interest or an attorney of re- ould be executed and filed in	or other document requirement	accress, a r iring the sign	equest for an express ature of the applicant,	
	SIGNATUR	RE of Practitioner of Reco	rd		
ine John R	. Pivnichny			· · · · · · · · · · · · · · · · · · ·	
	Pusuchan		Date	03/14/05	
gistration mber 43,001		·	Telephone	607-429-4358	

This form offices a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713,05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2